

# FEDERAL BENEFITS

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## FOR VETERANS

FACT SHEET

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### HEALTH CARE BENEFITS

Most veterans must apply for enrollment in order to receive health care benefits. Veterans may apply at any time. Once enrolled, veterans are eligible for a comprehensive benefits package of inpatient and outpatient services that include:

- Drugs and pharmaceuticals
- Preventive medicine services
- Primary care
- Surgery
- Emergency care
- Mental health and substance abuse treatment
- Home health care
- Respite and hospice care
- Homeless veterans programs

*Service-connected veterans are eligible for treatment of their service-connected disability even if they have not enrolled.*

#### **Health Care Enrollment**

To receive care, veterans generally must be enrolled with VA. A veteran may apply for enrollment at any time by calling **1-877-222-VETS (8387)**. Once enrolled, veterans are eligible for a comprehensive benefits package of inpatient and outpatient services, including preventive and primary care.

Once enrolled, veterans are part of a national health care system with over 1,100 service sites.

#### **Financial Assessment for Health Care**

Certain veterans applying for enrollment for health care must provide VA with information on their annual income and net worth in order to determine whether they are below the Means Test threshold. For those veterans who measure above the Means Test, the law requires that the veteran agrees to pay a co-payment. (Except veterans who were awarded the Purple Heart.) VA forms are available on the VA website, <http://www.va.gov/forms>

#### **What is the Means Test?**

The Means Test is an annual measure of your household income and assets. This includes your spouse's income and your dependent children's income. For information on how to do a Means Test, call toll-free, **1-877-222-VETS (8387)**.

#### **Billing Health Insurance Companies**

When applying for medical care, you must provide information pertaining to your health insurance coverage, including your spouse's insurance policy.

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A veteran's eligibility for VA health care benefits is not affected by health insurance coverage. Eligibility criteria relate to military service and, in some cases, to income and type of medical service needed.

If you are currently covered by a health plan (insurance policy), you must notify VA when registering for VA health care. Regardless of the insurance company, and regardless of who is the primary owner of the policy, VA is required by law to bill that health insurance company for nonservice-connected medical care.

If the full cost of your care is not recovered, VA will not collect nor hold you responsible for the charges not covered by the insurance company. However, there are instances where you must make a co-payment if certain income and asset is over the limits set by law.

### **Family Health Benefits**

CHAMPVA, the VA Civilian Health and Medical Program, shares the cost of medical care for dependents and survivors of veterans. If not eligible for TRICARE (the medical program for civilian dependents provided by the Department of Defense) or Medicare, Part A, as a result of reaching age 65, the following people are eligible for CHAMPVA:

- The spouse or child of a veteran with a permanent and total service-connected disability.
- The spouse or child of a veteran who died of a service-connected condition or was totally disabled from a service-connected condition at the time of death.
- The spouse or child of a person who died in the line of duty, if death was not caused by misconduct.

For more information, call our toll-free number, **1-877-222-VETS (8387)** or visit our website at [www.va.gov/hac](http://www.va.gov/hac)

### **Outpatient Pharmacy Services**

Outpatient pharmacy services are provided to all enrolled veterans receiving VA health care. The following veterans are not required to pay a co-payment:

- Veterans receiving medication for treatment of a service-connected condition.
- Veterans who are 50% or more service-connected.
- Veterans whose income does not exceed the annual maximum VA pension income amount.

Other veterans may be charged a co-payment for each 30-day or less supply of medication.

### **Eyeglasses, Hearing Aids, and Dental Care**

Eyeglasses and hearing aids normally require a service-connected rating of 10% or more but are not usually provided for normal hearing or vision loss unrelated to military service.

Routine dental treatment for teeth or jaw is provided only to veterans who are 100% service-connected or are ex-prisoners of war who were detained 90 days or more. Limited dental treatment may be provided if the dental problem is affecting a medical condition.

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### **Vet Centers**

VA provides readjustment counseling to any veteran who served in the military in a theater of combat operations during any period of war, or in any area during a period in which armed hostilities occurred. VA Vet Centers are small community-based facilities that provide a holistic mix of counseling and community social services, psychological counseling for veterans exposed to war trauma to include post-traumatic stress disorder, family counseling when needed for the veteran's readjustment, community outreach and education, and extensive case management and referral activities. The Vet Centers are located in the community, outside of the larger medical facilities.

### **Women's Programs**

Women veterans are eligible for the same VA benefits as male veterans.

Services and benefits for women veterans include breast and pelvic examinations and other general reproductive health care services, except in vitro fertilization.

Preventive health care includes counseling, contraceptive services, menopause management, Pap smears, and mammography. If VA is unable to provide such services, referrals are made to a private practitioner for such services.

VA health care professionals provide counseling and treatment to help women overcome psychological trauma resulting from personal and sexual assault during military service. Care also is provided for any injury, illness, or psychological condition resulting from such trauma.

Women Veterans Coordinators are available at all VA facilities to assist women seeking treatment and benefits. VA medical centers have made many structural changes to ensure privacy for women veterans.

National Mammography Hotline: **1-888-492-7844**.

For more information on health care benefits, please call our toll-free number, **1-877-222-VETS (8387)** or visit our website at **[www.va.gov](http://www.va.gov)**

### **Change in Eligibility for Veterans Awarded the Purple Heart**

Effective November 30, 1999, veterans who present verifiable proof of being awarded the Purple Heart are no longer required to complete a Means Test or pay a co-payment for their medical care. However, unless you fall within one of the groups listed in the Fact Sheet under Outpatient Pharmacy Services, you will still be required to pay applicable medication co-payments.

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